



9Who Care

9Who Care is a 9NEWS tradition of honoring the real unsung heroes in our community: volunteers. These individuals go beyond the demands of everyday life, and dedicate themselves to uplifting and improving the quality of life for others. The 9Who Care program was designed to honor these individuals for their extraordinary deeds and to encourage others to volunteer.

Award

- One individual a month, from September through May, will be chosen to receive the award.
- A \$900 cash award will be presented to the winner by 9NEWS.
- The winner will be featured on 9NEWS newscasts and on 9NEWS.com.
- Winners will be honored at the 9Who Care Awards program in June.

Nomination Process

- Nominations will be accepted throughout the year.
- Nominations must be made on a 9Who Care nomination form and sent to:
9Who Care, 500 Speer Boulevard, Denver, CO 80203
- Nomination packets must include a photograph of the nominee and two letters of recommendation from individuals other than family members.
- Nominations will be reviewed quarterly.
- Winners will be selected by the 9Who Care Board of Governors, a distinguished and diverse group of business and community leaders.
- Only winners and their nominators will be notified.
- Please do not submit videotapes, CD's or audio cassettes.

Qualifications and Restrictions

- The individual must be a resident of Colorado and must be 18 years of age or older.
- The individual cannot be compensated for his or her deeds or service.
- Nominations for groups will not be accepted.
- Nominations submitted by e-mail or fax will not be accepted.
- Nominations, pictures and supplemental materials cannot be returned.
- Only completed nominations will be considered.

9 Who Care Nomination Form



• 500 Speer Boulevard • Denver, Colorado 80203 • (303)871-9999

Please Type or Print

Name of Nominee _____

Nominee's Home Address _____

City _____, Colorado Zip _____ Nominee's Age _____

Nominee's E-mail address _____

Nominee's Telephone: (Home) _____ (Business) _____

Nominated by _____ Relationship to Nominee _____

Address _____ City _____ State _____ Zip _____

Telephone: (Home) _____ (Business) _____

Please attach
a non-returnable
photograph here

(Nominations without
a photo will not
be considered.)

Please organize your responses and avoid duplication of information. Specific examples are most helpful. You may include letters and testimonial statements. Attach additional pages if necessary. Please limit to 5 pages.

1. Please list any awards the nominee has received.

2. How long has the nominee been volunteering?

3. How many hours a week does the nominee volunteer?



9 Who Care

Nomination Form

4. Where has the nominee volunteered?

5. What motivates this individual to volunteer?

6. How has the nominee made a difference for others?

7. Who has benefitted by the volunteer work of the nominee?

8. Does the nominee inspire others to volunteer?

9. What makes this person truly outstanding?



Nomination Form

10. Please give information on nominee's family and interests.

11. Is the nominee aware of his/her nomination?

**Please attach all support material. Do not send originals.
Nomination form and support material should be mailed to:**

**9Who Care
c/o 9NEWS
500 Speer Boulevard
Denver, Colorado 80203**